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		DOGUITEIII	FAUE LUI 3						
Fill in this information to identify your case:									
Debtor 1	Robert R. Madara								
	First Name	Middle Name	Last Name						
Debtor 2	Darlene F. Madara	a							
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY							
Case number	16-12747								
(if known)									

Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Pa	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	52,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,712.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	62,712.00
Pa:	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	75,406.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	46,932.56
	Your total liabilities	\$	122,338.56
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,964.02
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,522.92
Pa:	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	hay and s	ubmit this form to

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Debtor 1 Robert R. Madara
Debtor 2 Darlene F. Madara

Case number (if known) 16-12747

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 1,470.02

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	l
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Fill in this information	to identify your case:	
Debtor 1	Robert R. Madara	
Debtor 2 (Spouse, if filing)	Darlene F. Madara	
United States Bankru	ptcy Court for the: DISTRICT OF NEW JERSEY	
	6-12747	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Forn	<u>n 106l</u>	MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed	☐ Employed ■ Not employed
	employers.	Occupation		
	Include part-time, seasonal, or self-employed work.	Employer's name		_
	Occupation may include student or homemaker, if it applies.	Employer's address		
		How long employed th	nere?	
Par	t 2: Give Details About Mor	nthly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$
3. Estimate and list monthly overtime pay.

3. +\$
4. Calculate gross Income. Add line 2 + line 3.

2.	\$	0.00	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	0.00	\$	0.00

For Debtor 2 or non-filing spouse

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

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	otor 1 otor 2	Robert R. Madara Darlene F. Madara	_	C	Case	number (if kno	own)	16-12	!747		
	Cop	y line 4 here	4.		For	Debtor 1	.00		Debtor :		
_								-			_
5.		all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$_		.00	\$		0.00	_
	5b.	Mandatory contributions for retirement plans	5b.		\$_		.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		\$		.00	\$		0.00	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.		\$ \$		.00	\$		0.00	_
	5e. 5f.	Domestic support obligations	5f.		\$ _		.00	\$ 		0.00	_
	5g.	Union dues	5g.		\$ _		.00	Ψ		0.00	_
	5g. 5h.	Other deductions. Specify:	5h.		<b>\$</b> -		.00	+ \$		0.00	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		Ψ— \$		.00	· •		0.00	_
7.			7.		Ψ \$			\$ 			-
		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		Φ_	U.	.00	Φ		0.00	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-		<b>c</b>		00	¢.		0.000	
	8b.	monthly net income. Interest and dividends	8a. 8b.		\$_ \$		.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	t		-			`		0.00	_
	04	settlement, and property settlement.  Unemployment compensation	8c. 8d.		\$ \$		.00	\$		0.00	_
	8d. 8e.	Social Security	8e.		\$ -	303.	.00	\$ 		0.00 191.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.		\$	0.	.00	\$		0.00	_
	8g.	Pension or retirement income	8g.		\$_	1,470.		\$		0.00	_
	8h.	Other monthly income. Specify:	8h.	.+	\$_	0.	.00	+ \$		0.00	=
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	<u> </u>	1,773.	.02	\$	1	,191.0	0
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		1,773.02	+ \$	1 1	91.00	= \$	2,964.02
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_		1,770.02			31.00	-	2,004.02
11.	11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify:  11. +\$ 0.00										
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaies							12.	\$	2,964.02
									L	Combi	
13.	Do y	you expect an increase or decrease within the year after you file this form	1?							monthl	y income
		Yes. Explain: Mr. Madara receives \$303.00 a month in social s	ecuri	ity	inco	me. This	amo	ount is	exem	ot from	1

distribution.

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# **United States Bankruptcy Court District of New Jersey**

In re	Robert R. Madara Darlene F. Madara		Case No.	16-12747	
		Debtor(s)	Chapter	13	

## AMENDED DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing document(s), consisting	of _	5	page(s),
and that they are true and correct to the best of my knowledge, information, and belief.			

Date	July 27, 2016	Signature	/s/ Robert R. Madara Robert R. Madara
			Debtor
Date	July 27, 2016	Signature	/s/ Darlene F. Madara
		<u> </u>	Darlene F. Madara
			Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.